

2812
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Attorney Docket No.: 01CON272P

AMENDMENT COVER SHEET

IN RE APPLICATION OF: Siamak Fazelpour

SERIAL NO.: 10/025,438 FILED: December 19, 2001

FOR: Method For Integrating Passives On-Die Utilizing Under Bump Metal And Related Structure

HONORABLE COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

RECEIVED
FEB 13 2003
TECHNOLOGY CENTER 2800

Sir:

Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.

- ☐ No additional fee is required.
- ☒ The fee has been calculated as shown below:

| | RATE Non-Small Entity | RATE Small-Entity | FEE |
|------------------------------------|--------------------------|----------------------|-----------|
| | | | |
| FIRST MONTH AFTER TIME PERIOD SET | 110.00 | 55.00 | \$ 110.00 |
| SECOND MONTH AFTER TIME PERIOD SET | 410.00 | 205.00 | \$ |
| THIRD MONTH AFTER TIME PERIOD SET | 930.00 | 465.00 | \$ |
| FOURTH MONTH AFTER TIME PERIOD SET | 1,450.00 | 725.00 | \$ |

☒ TOTAL EXTENSION FEE \$ 110.00

☐ FEE FOR EXTRA CLAIMS added by Amendment in this response:

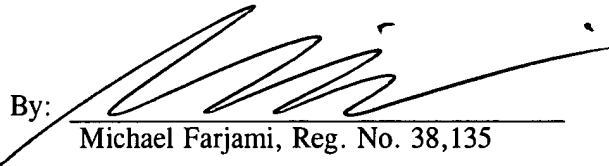
| | Column 1 | Column 2 | Column 3 | | | |
|--|--|----------------------------------|---------------------------|-----------------------------|----------------------|-----|
| | Number of Claims after Amendment | Number Previously Paid for | Number of Extra Claims | RATE Non-Small Entity | RATE Small Entity | FEE |
| TOTAL CLAIMS | 32 | MINUS **32 | * = 0 | x 18 | x 9 | \$ |
| INDEPENDENT | 2 | MINUS ***3 | * = 0 | x 84 | x 42 | \$ |
| First presentation of multiple dependent claim | | | | + 280 | + 140 | \$ |

TOTAL FEE FOR EXTRA CLAIMS \$ _____

- * If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.
- ** If the number of Total Claims previously paid for is less than 20, write "20" in this space.
- *** If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

- ☐ Total fee for Supplemental Information Disclosure Statement \$ _____
- ☒ Enclosed is the total fee of \$ 110.00.
- ☐ Please charge Deposit Account No. 50-0731 in the amount of \$ _____
- ☒ The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication, or credit any overpayment to Deposit Account No. 50-0731. A duplicate copy of this sheet is enclosed.

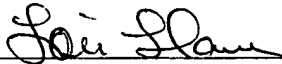
Date: 1/31/03

By: 
Michael Farjami, Reg. No. 38,135

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, D.C. 20231, on:

1/31/03



Signature

Lori Llave

Typed or Printed Name of Person Mailing Paper and/or Fee

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